U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



((x,x), (x,y), (y,y), (x,y), (x,y),

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - July 3	2. Fiscal Year Covered From:		
9	1 / 1 / 2004 Through: 12 / 30 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Joseph P Leone	Name Sheet Metal Workers Local Union #46		
	Labor Organization File Number		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 1900 Sherburne Road	Street 40 Rutter Street		
City: / Walworth	City Rochester		
State New York ZIP Code + 4 14568	State New York ZIP Code +4- 14606		
5. Position in labor organization. Training Coordinator			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name None			
Tráde Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street	7.b. Amount.		
The bit has determined an evidence of the control o			
State ZIP Code + 4	3 11 4 11 3 11 1 12 3 5 7 1 14 3 4 5 0 14 3 1 18 1 18 1 2 2 5 1		
	l distribution and programme described and programme of the programme of t		
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the see	Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the		
	cutoff of penalties in the instructions.)		
Signed Joseph Reone	on 8/12/05 S85-458-0400		

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Name of Person Filing Joseph Leone		File Number U -			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Blitman and King LLP	gonaponny				
Trade Name, if any:	a. Labor Organiza	ition			
P.O. Box, Bldg., Room No., if any Street 443 North Franklin St. Suite 300	c. Employer				
City Syracuse State New York ZIP Code + 4 13204-1415					
State INCW/IDIA					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	***************************************			
Name Sheet Metal Workers Local46 Health & Annuity	Legal Counsel for	the Health and Annuity Funds			
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any	Activities of the second of th				
Street 40 Rutter Street	11.b. Approximate dollar valu	ue of such dealing			
City Rochester		<u> Приниманий приниман</u>			
State New York ZIP Code + 4 14606	12.a. Nature of interest held or income received. 6/14/04 Erisa Educational Seminar with Golf				
	12.b. Amount.				
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money					
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name None					
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.				

Name of Person Filing Joseph Leone	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

C. N	9. Business deals with:	
8. Name and address of Business (including trade name, if any).	or pasiness as a small	
Name Manning and Napier Advisors	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
International desirable desirable international internatio	b. Trust	
P.O. Box, Bldg., Room No., if any		
Street 290 Woodcliff Drive	c. Employer	
City Rochester		
State New York ZIP Code + 4 1.4450		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Sheet Metal Workers LU#46 Health & Pension	Investment Manager	
	The second secon	as approximately
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	Property property (1998) Property for all public property (1998) and (1998) a	
Street 40 Rutter Street		
City Rochester		
State New York ZIP Code + 4 14606	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	8/17/04 Lunch with Golf	
	AND AND THE AMERICAN PROPERTY OF THE AMERICAN	
	12.b. Amount.	\$65

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Name of Person Filing Joseph Leone		File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:	**************************************
Name Lipsitz, Green, Fahringer, Roll, Salisbury, Cambr	a. Labor Organization	
Trade Name, if any: ia, LLP		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 42 Delaware Ave, Suite 300	c. Employer	
City Buffalo		
State New York ZIP Code + 4 14202		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Attorney	
Trade Name, if any:		e de la companya de
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	11/18/04 Dinner Meeting	
	And the second s	
	All properties and the second	
		The second secon
	12.b. Amount.	\$45